

# Graduate School of Library and Information Studies

## Financial Award Application Form

### for

## Bill and Melinda Gates Foundation Scholarship

Please submit this form to the University of Rhode Island with Graduate School of Library and Information Studies with your application for a Gates Foundation Scholarship.

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Name \_\_\_\_\_

State of Residency (country if not U.S. citizen) \_\_\_\_\_

***Please complete the following.***

**Your estimated budget for September 1, 2003 through August 31, 2004 (employment income should be after taxes):**

<b><i>Income</i></b>	Applicant	Spouse	Applicant & Spouse
Employment	\$ _____	\$ _____	\$ _____
Support from family or parents	\$ _____	\$ _____	\$ _____
Other (savings, etc.)	\$ _____	\$ _____	\$ _____
<b>TOTAL INCOME</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

***Expenses*** (include spouse if spouse will also be a student

Name of **school** spouse will attend (if applicable) \_\_\_\_\_

Tuition and fees	\$ _____	\$ _____	\$ _____
Books	\$ _____	\$ _____	\$ _____
Equipment and supplies	\$ _____	\$ _____	\$ _____
Rent or mortgage, including heat & utilities	\$ _____	\$ _____	\$ _____
Food and household supplies	\$ _____	\$ _____	\$ _____
Clothing, laundry, and cleaning	\$ _____	\$ _____	\$ _____
Auto insurance premiums	\$ _____	\$ _____	\$ _____
Other transportation expenses	\$ _____	\$ _____	\$ _____
Medical and dental expenses	\$ _____	\$ _____	\$ _____
Dependency obligations (please specify)	\$ _____	\$ _____	\$ _____
Child care	\$ _____	\$ _____	\$ _____
Annual debt repayment (include educational loans only if repayment has begun)	\$ _____	\$ _____	\$ _____
<b>TOTAL EXPENSES</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

***Financial Need*** (difference between total income and total expenses)

\$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

**Loans outstanding to date (include installment loans on cars, personal property, and loans for educational purposes):**

Source	Amount	Balance	By Month/Quarter
_____	\$ _____	\$ _____	\$ _____ / _____
_____	\$ _____	\$ _____	\$ _____ / _____
_____	\$ _____	\$ _____	\$ _____ / _____
_____	\$ _____	\$ _____	\$ _____ / _____

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_